



10 - 01 - 01

4

PTO/SB/05 (12/97)

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. COMP-0240 P01-3649	Total Pages 45
		First Named Inventor or Application Identifier Phillip M. Jones et al.	
Express Mail Label No. EL 827 072 484 US			

APPLICATION ELEMENTS
 See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
 Box Patent Application
 Washington, DC 20231

- | | |
|---|---|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)

2. <input checked="" type="checkbox"/> Specification Total Pages 26
(preferred arrangement set forth below)
-Descriptive
-Cross References to Related Application
-Statement Regarding Fed sponsored R & D
-Reference to Microfiche Appendix
-Background of the Invention
-Brief Summary of the Invention
-Brief Description of the Drawings (if filed)
-Detailed Description
-Claim(s)
-Abstract of the Disclosure

3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets 3
Total Pages 9

4. Oath or Declaration
a. <input checked="" type="checkbox"/> Newly executed (original or copy)
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
[Note Box 5 below]
i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

5. <input type="checkbox"/> Incorporation by Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | 6. <input type="checkbox"/> Microfiche Computer Program (Appendix)

7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
a. <input type="checkbox"/> Computer Readable Copy
b. <input type="checkbox"/> Paper Copy (identical to computer copy)
c. <input type="checkbox"/> Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS
8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))

9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (where there is an assignee)
10. <input type="checkbox"/> English Translation Document (if applicable)
11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS
Statement (IDS)/PTO-1449 Citations

12. <input type="checkbox"/> Preliminary Amendment

13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application
Statement(s) Status still proper and desired

15. <input type="checkbox"/> Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. <input checked="" type="checkbox"/> Other PTO-2038 (Credit card Payment Form)

17. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. / |
|---|---|

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)		<input checked="" type="checkbox"/> Correspondence address below	
NAME	Michael G. Fletcher Fletcher, Yoder & Van Someren		
ADDRESS	P.O. Box 692289		
CITY	Houston	STATE	Texas
		ZIP CODE	77269-2289
COUNTRY	USA	TELEPHONE	(281) 970-4545
		Fax	(281) 970-4503

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

 JC929 U.S. PTO
 09/29/01

09655271-092801

 JCS11 U.S. PTO
 09/29/01

FEE TRANSMITTAL

Complete if Known

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Phillip M. Jones et al.
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	COMP:0240/FLE (P01-3649)

TOTAL AMOUNT OF PAYMENT (\$)**848.00**

METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

06-1315/COMP:0240/FLE

Deposit Account Number
 Deposit Account Name
 Fletcher, Yoder & Van Someren

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)

2. ☒ Payment Enclosed:

☐ Check ☐ Money Order ☒ Other

PTO-2038 (Credit Card Payment Form)

FEE CALCULATION (fees effective 10/01/96)

1. FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	<u>710.00</u>
106	320	206	160	Design filing fee	_____
107	490	207	245	Plant filing fee	_____
108	710	208	355	Reissue filing fee	_____
114	150	214	75	Provisional filing fee	_____
SUBTOTAL (1)					(\$)<u>710.00</u>

2. CLAIMS

Total Claims	Extra	Fee from below	Fee Paid
21 - 20 =	1	X 18	= <u>18.00</u>
Independent Claims 4 - 3 =	1	X 80	= <u>80.00</u>

Multiple Dependent Claims _____ X _____ = _____

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim
109	80	209	40	Reissue independent claims over original patent
110	18	210	9	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **(\$)98.00**

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	_____
127	50	227	25	Surcharge - late provisional filing or cover sheet	_____
139	130	139	130	Non-English specification	_____
147	2,520	147	2,520	For filing a request for reexamination	_____
112	920	112	920	Requesting publication of SIR prior to Examiner action	_____
113	1,840	113	1,840	Requesting publication of SIR after Examiner action	_____
115	110	215	55	Extension for response within first month	_____
116	400	216	200	Extension for response within second month	_____
117	950	217	475	Extension for response within third month	_____
118	1,570	218	755	Extension for response within fourth month	_____
119	310	219	155	Notice of Appeal	_____
120	310	220	155	Filing a brief in support of an appeal	_____
121	270	221	135	Request for oral hearing	_____
138	1,510	138	1,510	Petition to institute a public use proceeding	_____
140	110	240	55	Petition to revive unavoidably abandoned application	_____
141	1,320	241	660	Petition to revive unintentionally abandoned application	_____
142	1,320	242	660	Utility issue fee (or reissue)	_____
143	450	243	225	Design issue fee	_____
144	670	244	335	Plant issue fee	_____
122	130	122	130	Petitions to the Commissioner	_____
123	50	123	50	Petitions related to provisional applications	_____
126	240	126	240	Submission of Information Disclosure Stmt	_____
581	40	581	40	Recording each patent assignment per property (times number of properties)	<u>40.00</u>
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))	_____
149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))	_____
Other fee (specify) _____					_____
Other fee (specify) _____					_____
SUBTOTAL (3)					(\$)<u>40.00</u>

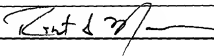
* Reduced by Basic Filing Fee Paid

SUBMITTED BY

Typed or Printed Name **Robert A. Manware**

Reg. Number **48,758**

Signature



Date

09/28/01

Deposit Acct. User ID

06-1315 - COMP:0240/FLE (P01-3649)